

ENTRY BLANK

PLEASE TYPE OR PRINT

☒ Entered previous May Show

☒ Ms.

☐ Mr. Artist

BARBARA SMUKLER

(Last Name Last)

Permanent Address

16980

S. PARK

SHAKER

Street

City

44120

Zip

Tel. 214

751-5504

Area Code

Temporary Address

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county?

Cuyahoga

Born in Cuyahoga County

☒ Yes

☐ No

Collaborator

(If Any)

If entries are not accepted or not sold:

☒ Artist will pick up entries at Museum.

☐ Museum should dispose of entries.

☐ Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

FOR DAMAGE TO OBJECTS SUBMITTED.

Signature

Barbara Smukler

ENTRY BLANKS

1

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Acrylic

Title

SPRING REFLECTIONS I

Price or NFS

Insurance Value
If NFS Only

Size

750.00

5' x 7'

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

DO NOT WRITE IN THIS SECTION

731 (1)

ACCEPTED

REJECTED

X

FEE PAID

BY

3/23

MB

2

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Acrylic

Title

SPRING REFLECTIONS II

Price or NFS

Insurance Value
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Size

750.00

5' x 7'

GRAPHICS AND PHOTOGRAPHY ONLY

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732 (1)

ACCEPTED

REJECTED

X

RECEIVED

BY

3/23

MB

DO NOT DETACH

1974 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	BARBARA SMUKLER		
Address	16980 S. PARK		
City & State	Cleveland Ohio	Zip	44120

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH



1

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Acrylic

H9

Title

SPRING REFLECTIONS I

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

731

(1)

X

picked up June 14, 1974

DO NOT DETACH



2

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

H7

Acrylic

Title

SPRING REFLECTIONS II

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

732

(1)

X